

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/744681		FILING DATE 06 JUN 2001			
						APPLICANT(S) <i>Ben Yehuda</i>					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1			/				51	/			
2				/			52	/			
3				/			53	/			
4				/			54	/			
5				/			55	/			
6				/			56	/			
7				/			57				
8				/			58				
9				/			59				
10				/			60				
11				/			61				
12				/			62				
13				/			63				
14				/			64				
15				/			65				
16				/			66				
17				/			67				
18				/			68				
19				/			69				
20				/			70				
21				/			71				
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28				/			78				
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32				/			82				
33				/			83				
34				/			84				
35				/			85				
36				/			86				
37				/			87				
38				/			88				
39				/			89				
40				/			90				
41				/			91				
42				/			92				
43				/			93				
44			/	/			94				
45				/			95				
46				/			96				
47			/	/			97				
48			/	/			98				
49			/	/			99				
50				/			100				
TOTAL IND.			5				TOTAL IND.	2			
TOTAL DEP.			45				TOTAL DEP.	4			
TOTAL CLAIMS			50				TOTAL CLAIMS	6			

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